WARRANT IN DEBT (CIVIL CLAIM	A FOR MONEY)	CASE NO.	HEARING DATE AND TIME
Commonwealth of Virginia VA. CODE § 16. Fairfax Count	.1- <i>1</i> 9	Morayitz, Michael PLAINTIFF(S) (LAST NAME, FIRST NAME, MIDDLE INITIAL)	
	••• • • • • • • • • • • • • • • • • •	c/o S. W. Dawson, Esq.	
4110 Chain Bridg	ge Road Fairfax, VA 22030. ET ADDRESS OF COURT	P. O. Box 58 Norfolk, VA 23501	
TO ANN AUTHORIZED OFFICER: You are	hereby commanded to summon the Defendant(s).	757.282.6601	
	ed to appear before this Court at the above address on	V.	
May 4,2015 9:30/	1 to answer the Plaintiff(s)' civil claim (see below)	Anderson, Officer Richard DEFENDANT(S) (LAST NAME, FIRST NAME, MIDDLE INITIAL)	
# RETURN DATE AND TIME		1437 Balls Hill Road	_
DATE ISSUED	[]CLERK [] DEPUTY CLERK [] MAGISTRATE	McLean, VA 22101	
CLAIM: Plaintiff(s) claim that Defendant(s)	owe Plaintiff(s) a debt in the sum of		
25,000.00 net of any credits, with	interest at 6.00 % from date of judgment until paid,	WARRANT IN DEBT	
\$ 58.00 costs and \$ (Cuson	attorney's fees with the basis of this claim being	TO DEFENDANT: You are not required to appear; however,	
Open Account [] Contract [] Note [Other (EXPLAIN)	indoment may be entered against you. See	
I Invessionable seizure in violation	n of 4th Amendment under 42 U.S.C. 1983	the additional notice on the reverse about requesting a change of trial location.	
		[] To dispute this claim, you must appear on the return date to try this case.	JUDGMENT PAID OR SATISFIED
HOMESTEAD EXEMPTION WAIVED?	YES EN cannot be demanded	[] To dispute this claim, you must appear on the return date for the judge to set another date for trial.	PURSUANT TO ATTACHED NOTICE
90 90 000 000 000 000 000 000 000 000 0	1).//		OF SATISFACTION.
DATE [] PLAIN	TIFF [X] PLAINTIFF'S ATTORNEY [] PLAINTIFF'S EMPLOYEE/AGENT	Bill of Particulars	SATISFACTION
CASE DISPOSITION	43.5.3	Grounds of Defense	DATE
JUDGMENT against [] named Defendant	s(s) []		
	f any credits, with interest at% from date	ATTORNEY FOR PLAINTIFF(S) S. W. Dawson, Esq.	CLERK
HOMESTEAD EXEMPTION WAIVED!	costs and \$attorney's fees [] YES [] NO [] CANNOT BE DEMANDED		DISABILITY
[] TUDGMENT FOR [] NAMED DEFE	NDANT(S) []	ATTORNEY FOR DEFENDANT(S)	ACCOMMODATIONS for loss of hearing,
[]NON-SUIT[]DISMISSED		ATTORNET FOR DEPLATE	vision, mobility, etc., contact the court ahead
Defendant(s) Present? [] YES			of time.
DATE	JUDGE Exhibit		

FORM DC-412 (PAGE ONE OF TWO) 07/04 PDF

	NAME. ADDRESS	Personal Service No. Deing unable to make personal service, a copy was delivered in the following manner:	sojourner or guest) age 16 or older at usual place sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above.	appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.)	SERVING OFFICER for
ng to law, as indicated below, unless not found.	NAME ADDRESS	[] PERSONAL SERVICE No. Being unable to make personal service, a copy was delivered in the following manner:	Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above.	[] Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.)	[] Served on Secretary of the Commonwealth [] NOT FOUND SERVING OFFICER for
RETURNS: Each defendant was served according to law, as indicated below, unless not found.	NAMEA	Personal Service Tel. Personal Service a copy was delivered in the following manner:	[] Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above.	[] Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.)	[] Served on Secretary of the Commonwealth [] NOT FOUND SERVING OFFICER for

written request to have the case moved for trial to the general district court of that city or county. To do so, you must do the To the Defendant(s): If you believe that Plaintiff(s) should have filed this suit in a different city or county, you may file a OBJECTION TO VENUE: following:

- shown on the other side of this form in the right corner, (c) Plaintiff(s)' name(s) and Defendant(s)' name(s), (d) the phrase "I move to object to venue of this case in this court because" and state the reasons for your objection Prepare a written request which contains (a) this court's name, (b) the case number and the "return date" as and also state in which city or county the case should be tried, and (e) your signature and mailing address. <u>,_</u>;
 - File the written request in the clerk's office before the trial date (use the mail at your own risk) or give it to the judge when your case is called on the return date. Also send or deliver a copy to plaintiff. d
 - If you mail this request to the court, you will be notified of the judge's decision. mi

I certify that I mailed a copy of this document to the defendants named therein at the address shown therein on March 18, 2015 DATE [1] Plaintiff's Agent [3] Plaintiff's Agent	Fi. Fa. issued on
I certify that I mailed a named therein at the a March 18, 2015	Fi. Fa. issued o Interrogatories Garnishment is